



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 1685

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|
| SERIAL NUMBER 09/725,476 | FILING DATE 11/30/2000 RULE | CLASS 709 | GROUP ART UNIT 2155 | ATTORNEY DOCKET NO. 922-117 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|

APPLICANTS

Sorcha O'Callaghan, Lucan, IRELAND;

Jerome Nolan, Dublin, IRELAND;
 Paul O'Keefe, Dublin, IRELAND; David Nolan, Celebridge, IRELAND;
 Kevin Jennings, Dublin, IRELAND; KB

** CONTINUING DATA ***** KB

** FOREIGN APPLICATIONS *****
 UNITED KINGDOM 0025507.5 10/18/2000 KB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 01/12/2001

| | | | | | |
|--|---|--------------------------------|------------------------|------------------------|-----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>KB</i> | STATE OR COUNTRY IRELAND | SHEETS DRAWING 6 | TOTAL CLAIMS 114 | INDEPENDENT CLAIMS 24 |
|--|---|--------------------------------|------------------------|------------------------|-----------------------------|

ADDRESS
 NIXON & VANDERHYE P.C.
 1100 North Glebe Rd., 8th Floor
 Arlington, VA
 22201-4714

TITLE
 Network unit with address cache for frequently occurring network conversations

| | | |
|-----------------------------------|---|---|
| FILING FEE RECEIVED 796 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|---|---|